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Bib Data Sheet

CONFIRMATION NO. 3993

SERIAL NUMBER 10/786,407	FILING DATE 02/25/2004  RULE	CLASS 335	GROUP ART UNIT 2832	ATTORNEY DOCKET NO. 21334-1309
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

*None - W*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

EUROPEAN PATENT OFFICE (EPO) 03005059.5 03/06/2003 *bx - W*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/18/2004

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY AUSTRIA	SHEETS DRAWING 5	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials 11-02-05		

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## TITLE

Relay with a core having an enlarged cross-section

FILING FEE  RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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